

part, to whom surrender is unknown, for whom artificial respiration, oxygen, intravenous stimulation and all the paraphernalia of desperation are old friends, rather than untried servants in the house of his resources. To the man who never left a man to die, we commend ourselves *in extremis* if life still seems good. To the training of such men the hopeless death-bed can contribute the unique, seasoning touch that perfects their skill. The hopeless conveys to such seasoned men no impulse to surrender. As in chess, so in the fight for life, the lost game makes the player.

To every physician there come many such critical moments, in which he recognizes and confronts the inevitable. If, especially in his earlier experience, he gives ground before it, he has lost a priceless heritage. The going down to death only seldom must mean pain to the dying in these days. To oppose it when the struggle means unrelievable agony is perhaps too much to ask. But in those cases in which this need not be, to summon every resource of skill and personality, and in his shirt-sleeves, with the sweat running into his eyes, to fight to stave off another's dissolution, makes a man. Here often for the first time one attains to the true appreciation of the capacity of the body to rally to its own defence, and to the first understanding of the possibilities of digitalis and atropin. He who has not brought back the seemingly dead to life, only to lose hardly in the end, fighting to the last ditch, has not won his spurs.

It is in the air of some wards and of some hospitals to watch an impending death almost with resignation. The young physician who breathes such contagion weakens in the knees. The dying turn black before him, and go down to the River Styx, crying out for help, and he stands by, lacking both the impulse and the knowledge for effective response. Many a worth-while life will slip through that man's hands before his course is run. Another, trained to a more far-sighted ideal, springs into sudden, well-directed action, and drags back the limp figure from the World of Shades, if only for an hour. The last man has, by the fight, added a cubit to his stature.

It is the service of inevitable death to school us for the defense of life, and only to those who have met and striven against it, even though to their own ultimate defeat, comes the power to give life where there is still hope. Let us rid ourselves of sophistry, at least on those occasions when, as physicians, we must measure up to the words of the Apocrypha, spoken of each one of us: "Yea, there is a time when in his hands is the issue of life. . . ."

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#### The Kinetic Drive

*To the Editor:*—In response to the statement of Dr. Pike (Correspondence, *THE JOURNAL*, Feb. 19, 1916, p. 591) I beg leave to confine myself to the two points that have been more objectively discussed.

With reference to the action of the iodine compound of the thyroid in the animal organism, the belief is expressed that "a misstatement of fact" was made in our commentary. In effect we expressed the opinion that it is superficial reasoning to pass so readily from observed facts about the influence exerted on electrical permeability of cells by sodium iodide, which by dissociation yields iodine ions, to the conclusion that an organic iodine compound, which contains "masked" or undissociable iodine, has the same influence. If there is "a misstatement of fact" in this, it must be about the undissociable iodine. To be brief: *There is nothing* in Scudder's tables which indicates that the dissociation involves the ionization of iodine in those and organic compounds which Dr. Pike mentions. It is permissible to deduce from the principles of physical chemistry accepted at present that the dissociation in these acid compounds which he mentions occurs in the carboxyl group; it is customary for writers on physical chemistry to refer to an element, bound as iodine is in these compounds, and most likely in the thyroid compounds also, as undissociable; Dr. Pike adduces nothing to show that it is not permissible to continue to refer to elements so bound in "masked" form as

undissociable. But even though it ever should develop that we are in error about this, is not our comment justified by its evident object, namely: to urge the desirability of applying experiment to the settlement of this question about the thyroid substance?

It was not necessary to point out the stimulating effect of free hydrogen ions on the respiratory center and their contrast effect on the cortical cells. It serves the intent of our comment on this matter to have these points reinforced. It is this contrast of effects in different parts of the nervous system which shows the unreasonableness of ascribing the rise of nerve impulses to difference of electric potential between different points on the neuromuscular apparatus. If the nerve impulses from the cerebral cortex owe their origin to a different potential between the cortex and the nerve end-organ, the impulses from the respiratory center must also depend on a difference of potential between the center and respiratory muscles—unless the nerve impulses in these two mechanisms are fundamentally dissimilar. For the present we adhere to the old-time notion that all nerve impulses are fundamentally similar. If increased hydrogen-ion concentration abolishes the difference of potential between the cortex and muscles, it must do the same thing between the respiratory center and muscles. But in the cortex greater concentration of hydrogen ions causes paralysis of the cells, while in the respiratory center it causes greater excitation; how does the latter phenomenon comport with the view that the rise of nerve impulses is due to difference of electric potential? Or how again are we to account for afferent nerve impulses—unless again they are fundamentally dissimilar to motor nerve impulses?

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#### Esperanto and the War

*To the Editor:*—In connection with the item on this subject (*THE JOURNAL*, Feb. 5, 1916, p. 439), allow me to invite attention to the further activities of Esperantists, and to the value and use of Esperanto in the present war: Esperantists have sent several fully equipped Red Cross Esperanto ambulances into the field, with personnel. Esperanto is being taught in the prison and internment camps, so that there may be a "common" language. There is an Esperanto "repatriation" bureau maintained in Geneva, Switzerland, through which disrupted families are brought together, correspondence forwarded, and much other good of a like nature accomplished. Statements relating to "justification" for the war were issued in Esperanto by governments, notably the German, which also issued official war bulletins in Esperanto, for international distribution. Keys, weighing but 5 grams, though containing the elements of the language and a vocabulary of more than 2,000 words, are published in practically all languages, for international conversational and correspondence purposes. A similar series of Esperanto Red Cross booklets is published, and much other work is being accomplished along these lines.

In short, Esperanto is proving its great value for its intended purposes, and it is the best passport in the warring countries that one may possess.

Mil faktoj atestas la meriton praktikan de la nomita lingvo.

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#### Constipation in Causation of Epilepsy and Migraine

*To the Editor:*—I have read with a great deal of interest Dr. Reed's articles on epilepsy. His theory of an edema of the subcortical nerve tracts, accompanying or following a condition of general acidosis, which in turn results in some way from stasis of the bowel contents, seems to be a real step in the right direction.

But it has occurred to me, as it doubtless has to others, that this fails to account for the symmetrical manifestations of the typical attack of epilepsy. A symmetrical edema of both internal capsules is of course possible, but shall we say it is probable?